GO TO TABLE OF CONTENTS GO TO INDEX

PURCHASE ORDER

No.		

SCHOOL EXTRA-CURRICULAR ACCOUNT

	DATE	, 19
Purchased from Address		
Purchased for		
Deliver to		
Send Invoice to		
To the Disbursing	Officer:	
The following	expense is incurred, payable from the School Extra-Curricular Account and chargeable to the Fund.	

Quantity	Description	Unit	Price	Total	
Quantity	Description		Price	Total	
		Total This Orde	r	\$	

Signed		
•	Daniela Australia al La Donala a a	

Person Authorized to Purchase

PAYMENT AUTHORIZATION VOUCHER

(Sign and Return with Invoice)

				No	
	SCHOOL EXTRA-C	CURRICULAR	ACCOUNT		
Paid by Check No.	Date	. 19	DAT	E	, 19_
Purchased from Address Purchased for					
Deliver to Send Invoice to					
Γο the Disbursing Officer:					
	is incurred, payable from the Schoo	ol Extra-Curricula	r Account and ch	nargeable to the	
No payment is to be m	ade for this order until this form is p	roperly filed and	the items have b	een received.	
Quantity	Description		Unit	Price	Total
	SA	MPLE	4		\$
			Total This Order		\$
Priced O.K.					
tems Received O.K.			Signed	Claim	
		Approved for F	ayment		
Date	, 19			Sponso	r

Date ______, 19___

PURCHASE ORDER AND PAYMENT AUTHORIZATION VOUCHER (FILE COPY)

CCOUNT DATE	No	
DATE		, 19
		, 19
		, 19
Account and charge		
Account and charge		
Account and charge		
e items have been		
Unit		Total
otal This Order	\$	
	Unit	

Prescribed Form SA 2 (Rev 1970)

CHECK

HRS	GROSS	FEDERAL	SOCIAL	STATE					PERIOD	EMPLOYEE
WORKED	PAY	WITH. TAX	SECURITY	WITH. TAX	INSURANCE				ENDING	DETACH
										BEFORE
										CASHING
PRESCRIBE	D BY STATI	E BOARD OF A	CCOUNTS						FORM No.	SA-2 (Rev. 1970)
				SCHOOL	EXTRA-CUR	RICULAR A	CCOUNT			
					(NAME OF	SCHOOL)			No.	
								_		
Fund										
Purpose						_, Indiana				, 19
P.O. No.							<i>A</i>			
Claim No	·		Pay to the			- 1	TH.			
Invoice	No		order of			$\mathbb{C}_{\mathbb{C}_{\mathbb{R}}}$			\$	
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									Dol	lars
Payable										
(Bank)	1									
										
			superintend	lent or Prin	сіраі			T	reasurer	
					SPACE FOR	M.I.C.R.				

ORIGINAL

HRS	GROSS	FEDERA	L SOCIAL	STATE				PERIOD	EMPLOYEE
WORKED	PAY	WITH. I		WITH. TAX	INSURANCE			ENDING	DETACH
-									BEFORE
									CASHING
RESCRIBED	BY STATI	BOARD C	F ACCOUNTS					FORM No.	SA-2 (Rev. 1970)
				SCHOOL	EXTRA-CUR	RICULAR A	CCOUNT		
					(NAME OF	SCHOOL) _		 No	
Fund									
Purpose _						_, Indiana			, 19
P.O. No.									
Claim No.							$\pi \mathbb{M}_{1}$		
Invoice N	10		order of					 \$	
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Payable a	at								.rur b
(Bank)									
					NON - NE	OTIABLE			
					SPACE FOR	M.I.C.R.			
					,				

DUPLICATE

RECEIPT SCHOOL EXTRA-CURRICULAR ACCOUNT

			SCH	HOOL			
		, IN		, 19	No.		
	Γ				e and Amount		
		Cash Amount	Check/Draft Amount	MO Amount	Credit Card/ Bank Card Amount	EFT Amount	Other
RECEIVED FROM					\$		
THE SUM OF		MI				DOLLARS	
FOR DEPOSIT TO THE CREDIT OF	SI					FUND	
SOURCE		(Activit	y)				
				TREAS	SURER		
		ORIGINAL					
Prescribed by State Board of Accounts					Forr	m No. SA-3 (R	evised 1997)
	SCHOOL EXTRA	RECEIPT A-CURRICU	LAR ACCOUN	IT			
			SCH	HOOL			
		, IN		, 19	No.		
				Payment Typ	e and Amount		
		Cash Amount	Check/Draft Amount	MO Amount	Credit Card/ Bank Card Amount	EFT Amount	Other
RECEIVED FROM			THE		\$		
THE SUM OF		MF				DOLLARS	
FOR DEPOSIT TO THE CREDIT OF	SA					FUND	
SOURCE		(Activit	y)				
				TREAS	SURER		

DUPLICATE

TICKET SALES

IER					DATE			
EK								
					ACTIVITY——			
	Т	ICKETS						
						TOTAL		
KIND	ISSUEI		RETURN		TICKETS	PRICE	AMOUNT	
	SERIAL NO.	AMT.	SERIAL NO.	AMT.	SOLD		SALES	
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				M	Phi			
			S					
	TOTAL							
le by				Verified	and Approved b			
	(Title)					(0	Official or Sponso	r)
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m SA-4) Prescribed by	State Board of Accou	nts		ET SAL	ES		No _	
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HOOL	ISSUEI	CICKETS	TICKE	ET SAL	TOWN OR CIT DATE—ACTIVITY—		TOTAL AMOUNT	
HOOL ———————————————————————————————————	T	CICKETS	TICKE	ET SAL	TOWN OR CIT DATE— ACTIVITY——		TOTAL	
HOOL	ISSUEI	CICKETS	RETURN SERIAL NO.	ED AMT.	TOWN OR CIT DATE—ACTIVITY— TICKETS SOLD		TOTAL AMOUNT	
HOOL	ISSUEI	CICKETS	RETURN SERIAL NO.	ED AMT.	TOWN OR CIT DATE—ACTIVITY— TICKETS SOLD		TOTAL AMOUNT	
HOOL ———————————————————————————————————	ISSUEI	CICKETS	RETURN SERIAL NO.	ED AMT.	TOWN OR CIT DATE—ACTIVITY— TICKETS SOLD		TOTAL AMOUNT	
HOOL ———————————————————————————————————	ISSUEI	CICKETS	RETURN SERIAL NO.	ED AMT.	TOWN OR CIT DATE—ACTIVITY— TICKETS SOLD		TOTAL AMOUNT	
HOOL	ISSUEI	CICKETS	RETURN SERIAL NO.	ED AMT.	TOWN OR CIT DATE—ACTIVITY—		TOTAL AMOUNT	

FINANCIAL REPORT SCHOOL EXTRA-CURRICULAR ACCOUNT

School
SCHEDULE OF BALANCES
RECEIPTS AND EXPENDITURES OF
SCHOOL EXTRA-CURRICULAR ACCOUNT

From	, 19
To	, 19

NAME OF FUND	BALANCE BEGINNING OF PERIOD 1	RECEIPTS DURING PERIOD 2	EXPENDITURES 3	BALANCE END OF PERIOD 4	
	\$	\$	\$	\$	
-					
		SAMPLE			
TOTAL ALL FUNDS	\$	\$	\$	\$	

CASH RECONCILEMENT

NAME OF BANK	LOCATION	
DEPOSITORY BALANCE	19	\$
CASH ON HAND (ADD)		
CAGITON TIAND (ADD)		
TOTAL CASH ON HAND AND IN DEPOSITORY		\$
TOTAL OF OUTSTANDING CHECKS (DEDUCT)		
BALANCE	19	\$

OUTSTANDING CHECKS	
	, 19

DATE	NUMBER	AMOUNT		DATE	NUMBER	AMOUNT	
		\$		BROUGHT FOR	WARD	\$	
			_	PLE			
		5	A				
CARRIED FORWAR	.D	\$		TOTAL		\$	

DETAIL OF RECEIPTS AND EXPENDITURES BY FUNDS

BY F	FUNDS		
REC	EIPTS		
SOURCE OF RECEIPTS	NATURE OF RECEIPTS	AMOUNT	
		\$	
	DIE		
50			
TOTAL RECEIPTS		\$	

NOTE: TOTAL RECEIPTS MUST AGREE WITH RECEIPTS OF THIS FUND AS SHOWN IN COLUMN 2, PAGE 1.

EXPENDITURE

PURPOSE OF EXPENDITURE	AMOUNT
	\$
TOTAL EXPENDITURES	\$

The bank in which a	all moneys of this account are deposited is:	
	Name of Bank	
	Location of Bank	
Date school officially o	closed, 19	
	BOND OF SCHOOL TREASURER	
Name of Country	SAMPLE	
Name of Surety Amount of Bond \$	SAMIL	
Date of Expiration		
Principal, of the Extra-Curricular Account account is true and corr certify that copies of t	Treasurer, Standard American	the said I further
	Principal	
	FIIIICIPAT	
COPIES TO BE FILED AS FO	DLLOWS:	
Township School:	1 copy to Township Trustee 1 copy to County Superintendent	
School Corporation:	<pre>1 copy to Board of School Trustees or Boa of School Commissioners 1 copy to Superintendent of Schools</pre>	ırd

Prescribed by State Board of Accounts Form SA-6 (Rev. 1970)

SCHOOL EXTRA-CURRICULAR ACCOUNT	
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TONE

			RECEIPT					
			OR		RECEIPTS	DISBURSEMENTS		
	DATE	ITEM	CHECK NO.		DEBIT	CREDIT	BALANCE	
1								1
2								2
3								3
4								4
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CLAIM FOR PAYMENT

				No	
	SCHOOL	_EXTRA-CURRICULAR	ACCOUNT		
Paid by Check No	Date	. 19	DATE	=	, 19
Purchased from Address Purchased for Delivered to Invoice handed to					
	Fu	om the School Extra-Curricular und. his form is properly filed and t			
Quantity		pription	Unit	Price	Total
	S	AMPLE			\$
			Total This Order		\$
Priced O.K. Items Received O.K. Except as noted			Signed	Claim	
Date		Approved for	Payment		

INVENTORY OF RENTAL TEXTBOOKS

, 19	
Date	Name of School or School Corporation

NAME OF PUBLISHING	NAME OF TEXTBOOK OR		RETAIL	TOTAL
COMPANY	SERIES OF TEXTBOOKS	QUANTITY	PRICE	VALUE
COMPANT	SERIES OF TEXTBOOKS	QUANTITY	PRICE	VALUE
	N	OTAL		
	SAM			
	SIL			

orm Prescribed by	State Board of Accounts							School Fo	rm No. TBR-2 (Rev. 199
		OFFIC	CIAL RECEIPT	S - INDIVID	UAL TEXTB	OOK RENT	AL LIST		
				S0	CHOOL,		, INDIANA		
								Receipt	0001
	Date			Name of Stud	lent		Grad	e	
	Г	•		Payment Typ	oe and Amount				
					Credit Card/				
		Cash Amount	Check/Draft Amount	MO Amount	Bank Card Amount	EFT Amount	Other		
Quantity		Description	n - Name - Series - C	Code		Unit Price	Total Rental Fee	For Us	e of Issuing Officer
					T. W.				
				SAMP					
				Dr 2					
Total Received						\$	\$		
Care should be e	TS AND PARENTS: xercised in the use of rente l use, an additional charge								
	r grades with a fixed list of ch attached list instead of f			o demand it, a co	py of the printed list	t may be attached	to the TBR-2 form	and the form proc	essed with
									Issuing Officer

School _____

SCHOOL FOOD SERVICE CERTIFICATION OF MEALS PROVIDED PER HOME RULE

Date _____19___

												DA'	Y OF	- MC	DNT	н мі	EAL	PRO	OVIC	DED											
NAME/POSITION	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31
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TOTAL THIS PAGE																															

I certify that the above named indi	viduals received meals on the dates designated in accordance with written School
Board Policy.	
	Authorized Signature

Form Prescribed by State Board of Accounts School Form SF-2 (Revised 1998)

SCHOOL FOOD SERVICE DAILY RECORD OF CASH RECEIVED

School

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SF-2A SCHOOL FOOD SERVICE SF-2A DAILY RECORD OF MEALS/MILK SERVED School

					NSLP						AFTER	SCHOO) SUP						SBP							
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No	19	Paid	Free	Redu.	Total	Meals	Meals	Meals	Paid	Free	Redu.	Total	Meals	Meals	Meals	Paid	Free	Redu.	Total	Meals	Meals	Meals	Paid	Free	Total	
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Date	Signature	

Form Prescribed by State Board of Accounts School Form SF-3 (Revised 1998)

SCHOOL FOOD SERVICE CASH DISBURSEMENTS

School

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I N E	Date	Check Number	Vendor/ Description		Food		Labo Serv Are Direc	rice ea	P	abor - Food rep. & pensing	E Pui	quip	se		quip pairs	3	Mis Oth		Description of Misc/Other Expense		FOTAI BURS	F	REPAID FOOD RUST		AILA CAS ALAN	Н	B₽	LANC	Œ	I N E No
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Form Prescribed by State Board of Accounts

SCHOOL FOOD SERVICE LEDGER OF RECEIPTS, DISBURSEMENTS AND BALANCE

School			
-			

L				CASH REC	CEIPTS												CASH	DISBUF	RSEME	NTS										l
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SCHOOL FOOD SERVICE TICKET CONTROL

	Type of Ticket	_	
School		School Year	

Ticket Numbers	School	Date	Signature
	1 A	,	
	SAMPLE	4	
	SANT		
	_		

SCHOOL FOOD SERVICE
EQUIPMENT INVENTORY

Page of

SCHOOL	Date	Date							
		PURCHASE		MODEL OR					
ITEM / DESCRIPTION	QUANTITY	DATE	BRAND NAME	SERIAL NUMBER	COST				
			A						
		SI	MPLE						

SCHOOL FOOD SERVICE FOOD INVENTORY

Page	of	f
Page	0	

School Date Beginning Inventory Ending Inventory

\$_				
1				

Item Description	Unit Size	No. Units	Unit Cost	Total Value
		MPI		
		3 TPL		
	54			

Governmental Unit

RECEIPT REGISTER

																	Pa	ayme	ent T	уре	and	Amo	unt					
Receipt	Receipt		Red	eipt							ash			heck				MC)		Ba	nk Ca	ard		EFT			
Date	Number	L,	Am	ount		Received From	Fund	Description	L	An	nour	nt	L	Amo	ount		/	Amo	unt		A	moui	nt	<i></i>	Amou	nt	Ot	ther
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